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PTO/SB/05 (2/98)  
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR § 1.53(b))

Attorney Docket No. 2003-0888.01/4670-276

First Inventor or Application Identifier Benjamin Alan Askren

Title Toner Housing Plug With Toner Level Sensor

Express Mail Label No. EV 368752426 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

## ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-14501. ☒ \*Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)2. ☒ Specification [Total Pages 13]  
(preferred arrangement set forth below)

- Descriptive title to the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 5]4. ☒ Oath or Declaration [Total Pages 4]a. ☒ Newly executed (original or copy)b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 17 completed)  
[Note Box 5 below]i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).5. ☐ Incorporation By Reference (useable if Box 4b is checked)  
The entire disclosure of the prior application, from which a  
copy of the oath or declaration is supplied under Box 4b,  
is considered as being part of the disclosure of the  
accompanying application and is hereby incorporated by  
reference therein.6. ☐ Microfiche Computer Program (Appendix)  
7. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

- 8. ☒ Assignment Papers (cover sheet & document(s))
- 9. ☐ 37 C.F.R. § 3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)
- 10. ☐ English Translation Document (if applicable)
- 11. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- 12. ☐ Preliminary Amendment
- 13. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- 14. ☐ \*Small Entity ☐ Statement filed in prior application,  
Statement(s) Status still proper and desired
- 15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
- 16. ☒ Other: Express Mail Certification

\*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE  
ENTITLED TO PAY SMALL ENTITY FEES, A SMALL  
ENTITY STATEMENT IS REQUIRED (37 C.F.R.  
§ 1.27), EXCEPT IF ONE FILED IN A PRIOR  
APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary statement:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_ / \_\_\_\_\_  
Prior application information: Examiner: Group/Art Unit: \_\_\_\_\_

## 18. CORRESPONDENCE ADDRESS

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Date

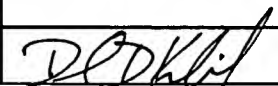
March 11, 2004

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|---|--|--|-------------|
| <b>FEE TRANSMITTAL</b><br>Patent fees are subject to annual revision on October 1<br>These are the fees effective December 29, 1999.<br>Small Entity payments <u>must</u> be supported by a small entity statement.<br>otherwise large entity fees must be paid. See Forms PTO/SB/09-12.<br>See 37 C.F.R. §§ 1.27 and 1.28. |  | Complete if Known                            |             |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$982.00)   |  | Application Number    TBA                    | Filing Date |
| First Named Inventor    Benjamin Alan Askren  |  | Examiner Name    TBA                         |             |
| Group Art Unit    TBA   |  | Attorney Docket No.    2003-0888.01/4670-276 |             |

| METHOD OF PAYMENT (check one)   | FEE CALCULATION (continued)  |                 |                 |  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
|---|--|-----------------|-----------------|--|-----------------|-----------------|--------|-----|-----|-----|--------------------|-------------------------------------|-----|-----|-----|-----|-------------------|--|-----|-----|-----|-----|------------------|---------------------------|-----|-----|-------|-----|--------------------|--|-----|-----|------|-----|------------------------|--|---------------------|-----|--------|-----|--------|--|--|-----|--------------|-----|----------------|--|----------|-----|--------------|-----|---------|---|---|-------|-----|------|-------------|--|--------|-----|-------|-------|-----|---|--------|-----|-------|-----|-----|--|---|-----|---|-----|-----|------------------|--|-----|-----|-----|----------------|--|----------------|-----------------|-----------------|-----|-----|--------------------------|-----|-----|-------|-----|------------------------|---|--|-----|-----|-----|-----|----------------------------------|-----------------------------------|-----|-------|-----|-----|------------------------------------|-----|-----|--------------------------|-----|-----|--------------------------------|-----|-----|-----|-----|---|------------------|--|-----|-----|-----|-----|-----------------|---|-----|-----|-----|---------------------|-------------------------------|--|-----|----|------------|----|---|--|-----|-----|-----|-----|--|--|-----|----|-----|----|--|-------|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|---------------------------|--|--|--|--|--|---------------------------|--|--|--|--|--|-----------------------------------|--|--|--|--|--|-------------------------------|--|--|--|--|--|
| 1. <input checked="" type="checkbox"/> The Commission is hereby authorized to charge indicated fees and credit any over payments to:<br><br>Deposit Account Number    18-1167<br><br>Deposit Account Name    Coats & Bennett, P.L.L.C.<br><br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR §1.18 at the Mailing of the Notice of Allowance<br><br>2. <input checked="" type="checkbox"/> Payment Enclosed:<br><input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other  | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examination action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,360</td><td>218</td><td>680</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,850</td><td>228</td><td>925</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,210</td><td>241</td><td>605</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,210</td><td>242</td><td>605</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>430</td><td>243</td><td>215</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>580</td><td>244</td><td>290</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Information Disclosure Stmt.</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>146</td><td>760</td><td>246</td><td>380</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>760</td><td>249</td><td>380</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;">*Reduced by Basic Filing Fee Paid</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (3)</b>    (\$40.00)</td> <td></td> </tr> </tbody> </table> | Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$) | Fee Description | Paid   | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath |     | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130 | 139 | 130              | Non-English specification |     | 147 | 2,520 | 147 | 2,520              | For filing a request for reexamination |     | 112 | 920* | 112 | 920*                   | Requesting publication of SIR prior to Examiner action |                     | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examination action |  | 115 | 110          | 215 | 55             | Extension for reply within first month |          | 116 | 380          | 216 | 190     | Extension for reply within second month |   | 117   | 870 | 217  | 435         | Extension for reply within third month |        | 118 | 1,360 | 218   | 680 | Extension for reply within fourth month |        | 128 | 1,850 | 228 | 925 | Extension for reply within fifth month |   | 119 | 300   | 219 | 150 | Notice of Appeal |  | 120 | 300 | 220 | 150            | Filing a brief in support of an appeal |                | 121             | 260             | 221 | 130 | Request for oral hearing |     | 138 | 1,510 | 138 | 1,510                  | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55  | Petition to revive - unavoidable |                                   | 141 | 1,210 | 241 | 605 | Petition to revive - unintentional |     | 142 | 1,210                    | 242 | 605 | Utility issue fee (or reissue) |     | 143 | 430 | 243 | 215   | Design issue fee |  | 144 | 580 | 244 | 290 | Plant issue fee |   | 122 | 130 | 122 | 130                 | Petitions to the Commissioner |  | 123 | 50 | 123        | 50 | Petitions related to provisional applications |  | 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt. |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 146 | 760 | 246 | 380 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 760 | 249 | 380 | For each additional invention to be examined (37 CFR 1.129(b)) |  | Other fee (specify) _____ |  |  |  |  |  | Other fee (specify) _____ |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  |  |  | <b>SUBTOTAL (3)</b> (\$40.00) |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code  | Entity Fee (\$) | Fee Description  | Paid            |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 105   | 130  | 205             | 65              | Surcharge - late filing fee or oath  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 127   | 50   | 227             | 25              | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 139   | 130  | 139             | 130             | Non-English specification  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 147   | 2,520  | 147             | 2,520           | For filing a request for reexamination                                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 112   | 920*   | 112             | 920*            | Requesting publication of SIR prior to Examiner action                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 113   | 1,840*   | 113             | 1,840*          | Requesting publication of SIR after Examination action                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 115   | 110  | 215             | 55              | Extension for reply within first month                                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 116   | 380  | 216             | 190             | Extension for reply within second month                                    |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 117   | 870  | 217             | 435             | Extension for reply within third month                                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 118   | 1,360  | 218             | 680             | Extension for reply within fourth month                                    |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 128   | 1,850  | 228             | 925             | Extension for reply within fifth month                                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 119   | 300  | 219             | 150             | Notice of Appeal   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 120   | 300  | 220             | 150             | Filing a brief in support of an appeal                                     |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 121   | 260  | 221             | 130             | Request for oral hearing   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 138   | 1,510  | 138             | 1,510           | Petition to institute a public use proceeding                              |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 140   | 110  | 240             | 55              | Petition to revive - unavoidable   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 141   | 1,210  | 241             | 605             | Petition to revive - unintentional   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 142   | 1,210  | 242             | 605             | Utility issue fee (or reissue)   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 143   | 430  | 243             | 215             | Design issue fee   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 144   | 580  | 244             | 290             | Plant issue fee  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 122   | 130  | 122             | 130             | Petitions to the Commissioner  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 123   | 50   | 123             | 50              | Petitions related to provisional applications                              |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 126   | 240  | 126             | 240             | Submission of Information Disclosure Stmt.                                 |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 581   | 40   | 581             | 40              | Recording each patent assignment per property (times number of properties) | 40.00           |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 146   | 760  | 246             | 380             | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 149   | 760  | 249             | 380             | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Other fee (specify) _____   |  |                 |                 |  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Other fee (specify) _____   |  |                 |                 |  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| *Reduced by Basic Filing Fee Paid   |  |                 |                 |  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| <b>SUBTOTAL (3)</b> (\$40.00)   |  |                 |                 |  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>770</td><td>201</td><td>345</td><td>Utility filing fee</td><td>770.00</td></tr> <tr><td>106</td><td>310</td><td>206</td><td>155</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>480</td><td>207</td><td>240</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>760</td><td>208</td><td>380</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td>(\$770.00)</td> </tr> </tbody> </table><br><b>2. EXTRA CLAIM FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>20</td> <td>-20** =</td> <td>0</td> <td>X</td> <td>18.00</td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Independent</td> <td>5</td> <td>-3** =</td> <td>2</td> <td>X</td> <td>86.00</td> <td>=</td> <td>172.00</td> </tr> <tr> <td>Claims</td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>=</td> <td></td> </tr> <tr> <td colspan="8">** or number previously paid, if greater; For Reissues, see below</td> </tr> <tr> <td>Large Fee Code</td> <td>Entity Fee (\$)</td> <td>Small Fee Code</td> <td>Entity Fee (\$)</td> <td colspan="4">Fee Description</td> </tr> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td colspan="4">Claims in excess of 20</td></tr> <tr><td>102</td><td>78</td><td>202</td><td>39</td><td colspan="4">Independent claims in excess of 3</td></tr> <tr><td>104</td><td>260</td><td>204</td><td>130</td><td colspan="4">Multiple dependent claim</td></tr> <tr><td>109</td><td>78</td><td>209</td><td>39</td><td colspan="4">**Reissue independent claims over original patent</td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td colspan="4">**Reissue claims in excess of 20 and over original patent</td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td colspan="3">(\$172.00)</td> </tr> </tbody> </table> | Large Fee Code   | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$)  | Fee Description | Fee Paid        | 101    | 770 | 201 | 345 | Utility filing fee | 770.00                              | 106 | 310 | 206 | 155 | Design filing fee |  | 107 | 480 | 207 | 240 | Plant filing fee |                           | 108 | 760 | 208   | 380 | Reissue filing fee |  | 114 | 150 | 214  | 75  | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |     |        |     |        | (\$770.00)   |  |     | Extra Claims |     | Fee from below |  | Fee Paid |     | Total Claims | 20  | -20** = | 0                                       | X | 18.00 | =   | 0.00 | Independent | 5                                      | -3** = | 2   | X     | 86.00 | =   | 172.00                                  | Claims |     |       |     | X   |  | = |     | ** or number previously paid, if greater; For Reissues, see below |     |     |                  |  |     |     |     | Large Fee Code | Entity Fee (\$)                        | Small Fee Code | Entity Fee (\$) | Fee Description |     |     |                          | 103 | 18  | 203   | 9   | Claims in excess of 20 |   |  |     | 102 | 78  | 202 | 39                               | Independent claims in excess of 3 |     |       |     | 104 | 260                                | 204 | 130 | Multiple dependent claim |     |     |                                | 109 | 78  | 209 | 39  | **Reissue independent claims over original patent |                  |  |     | 110 | 18  | 210 | 9               | **Reissue claims in excess of 20 and over original patent |     |     |     | <b>SUBTOTAL (2)</b> |                               |  |     |    | (\$172.00) |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid        |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 101   | 770  | 201             | 345             | Utility filing fee   | 770.00          |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 106   | 310  | 206             | 155             | Design filing fee  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 107   | 480  | 207             | 240             | Plant filing fee   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 108   | 760  | 208             | 380             | Reissue filing fee   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 114   | 150  | 214             | 75              | Provisional filing fee   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| <b>SUBTOTAL (1)</b>   |  |                 |                 |  | (\$770.00)      |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
|   |  | Extra Claims    |                 | Fee from below   |                 | Fee Paid        |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Total Claims  | 20   | -20** =         | 0               | X  | 18.00           | =               | 0.00   |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Independent   | 5  | -3** =          | 2               | X  | 86.00           | =               | 172.00 |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Claims  |  |                 |                 | X  |                 | =               |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| ** or number previously paid, if greater; For Reissues, see below   |  |                 |                 |  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| Large Fee Code  | Entity Fee (\$)  | Small Fee Code  | Entity Fee (\$) | Fee Description  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 103   | 18   | 203             | 9               | Claims in excess of 20   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 102   | 78   | 202             | 39              | Independent claims in excess of 3  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 104   | 260  | 204             | 130             | Multiple dependent claim   |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 109   | 78   | 209             | 39              | **Reissue independent claims over original patent                          |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| 110   | 18   | 210             | 9               | **Reissue claims in excess of 20 and over original patent                  |                 |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |
| <b>SUBTOTAL (2)</b>   |  |                 |                 |  | (\$172.00)      |                 |        |     |     |     |                    |                                     |     |     |     |     |                   |  |     |     |     |     |                  |                           |     |     |       |     |                    |  |     |     |      |     |                        |  |                     |     |        |     |        |  |  |     |              |     |                |  |          |     |              |     |         |   |   |       |     |      |             |  |        |     |       |       |     |   |        |     |       |     |     |  |   |     |   |     |     |                  |  |     |     |     |                |  |                |                 |                 |     |     |                          |     |     |       |     |                        |   |  |     |     |     |     |                                  |                                   |     |       |     |     |                                    |     |     |                          |     |     |                                |     |     |     |     |   |                  |  |     |     |     |     |                 |   |     |     |     |                     |                               |  |     |    |            |    |   |  |     |     |     |     |  |  |     |    |     |    |  |       |     |     |     |     |   |  |     |     |     |     |  |  |                           |  |  |  |  |  |                           |  |  |  |  |  |                                   |  |  |  |  |  |                               |  |  |  |  |  |

| SUBMITTED BY          |   |  |  | Complete (if applicable) |                |
|-----------------------|---|--|--|--------------------------|----------------|
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| Signature             |  |  |  | Date                     | March 11, 2004 |
|                       |   |  |  | Deposit Account User ID  | 18-1167        |

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**In re Application of:  
Askren, et al.**

**Filed:**

**Title: TONER HOUSING PLUG WITH TONER LEVEL SENSOR**

Attorney's Docket No: 2003-0888.01/4670-276

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**DATE MAILED: March 11, 2004**

I hereby certify that the enclosed US Utility Patent Application Transmittal Form, Fee Transmittal Form (2 Copies), specification and claims, drawings (1 set of 5 sheets), Declaration and Power of Attorney, Assignment and Recordation Sheet, Information Disclosure Statement, and our check number 11433 in the amount of \$982.00 are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to: **Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

Respectfully submitted,

**COATS & BENNETT, P.L.L.C.**

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